

MAR 06 2012

Please type or print in ink.



12 MAR -8 AM 11:19

NAME OF FILER

BOTELHO

ANTHONY

JUDICIAL CLERK

BY

1. Office, Agency, or Court

Agency Name

SAN BENITO COUNTY

Division, Board, Department, District, if applicable

BOARD OF SUPERVISORS

Your Position

SUPERVISOR - DISTRICT 2

► If filing for multiple positions, list below or on an attachment.

Agency: SEE ATTACHED LIST

Position: _____

2. Jurisdiction of Office (Check at least one box)

☐ State

☐ Judge or Court Commissioner (Statewide Jurisdiction)

☐ Multi-County _____

☒ County of SAN BENITO

☐ City of _____

☐ Other _____

3. Type of Statement (Check at least one box)

☒ **Annual:** The period covered is January 1, 2011, through December 31, 2011.

-or-

The period covered is ____/____/____, through December 31, 2011.

☐ **Leaving Office:** Date Left ____/____/____
(Check one)

☐ The period covered is January 1, 2011, through the date of leaving office.

☐ **Assuming Office:** Date assumed ____/____/____

☐ The period covered is ____/____/____, through the date of leaving office.

☐ **Candidate:** Election Year _____ Office sought, if different than Part 1: _____

4. Schedule Summary

Check applicable schedules or "None."

► Total number of pages including this cover page: 9

☒ **Schedule A-1 - Investments** -- schedule attached

☒ **Schedule C - Income, Loans, & Business Positions** -- schedule attached

☒ **Schedule A-2 - Investments** -- schedule attached

☐ **Schedule D - Income - Gifts** -- schedule attached

☒ **Schedule B - Real Property** -- schedule attached

☒ **Schedule E - Income - Gifts - Travel Payments** -- schedule attached

-or-

☐ **None** - No reportable interests on any schedule

herein and in any attached schedules is true and complete. I acknowledge this is

I certify under penalty of perjury under the laws of the State of California that

Date Signed

2-28-12
(month, day, year)

Signature

LIST OF MULTIPLE POSITIONS FOR: ANTHONY J. BOTELHO- 700 FORM (2012)

COG Director – LTA, MEA, ALUC, SAFE (annual)

Emergency Medical Care Committee – Committee Member (annual)

Local Task Force – Committee Member (annual)

Local Agency Formation Comm. (LAFCO) – Director (annual)

Anthony J. Botelho
382 Olympia Avenue
San Juan Bautista, CA. 95045
(831) 801-8246
bpfruit@garlic.com

Do not attach brokerage or financial statements.

FPPC Form 700 (2011/2012) Sch. A-1
FPPC Toll-Free Helpline: 866/275-3772 www.fppc.ca.gov

SCHEDULE A-2
Investments, Income, and Assets
of Business Entities/Trusts
(Ownership Interest is 10% or Greater)

| |
|-------------------------------------------------------------------|
| CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION |
| Name ANTHONY BOTELHO |

► 1. BUSINESS ENTITY OR TRUST

B & P FRUIT COMPANY

Name

382 OLYMPIA AVE., SAN JUAN BTA., CA. 95045

Address (Business Address Acceptable)

Check one

☐ Trust, go to 2 ☒ Business Entity, complete the box, then go to 2

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

FAIR MARKET VALUE

IF APPLICABLE, LIST DATE:

☐ \$0 - \$1,999

☐ \$2,000 - \$10,000

☐ \$10,001 - \$100,000

☐ \$100,001 - \$1,000,000

☒ Over \$1,000,000

____/____/11

ACQUIRED

____/____/11

DISPOSED

NATURE OF INVESTMENT

☐ Sole Proprietorship

☐ Partnership

☒ CORPORATION

Other

YOUR BUSINESS POSITION **TREASURER**

► 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)

☐ \$0 - \$499

☐ \$10,001 - \$100,000

☐ \$500 - \$1,000

☒ OVER \$100,000

☐ \$1,001 - \$10,000

► 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary.)

► 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD BY THE BUSINESS ENTITY OR TRUST

Check one box:

☐ INVESTMENT

☒ REAL PROPERTY

Name of Business Entity, if Investment, or
Assessor's Parcel Number or Street Address of Real Property

7480 SAN FELIPE ROAD, GILROY, CA.

Description of Business Activity or
City or Other Precise Location of Real Property

FAIR MARKET VALUE

IF APPLICABLE, LIST DATE:

☐ \$2,000 - \$10,000

☐ \$10,001 - \$100,000

☐ \$100,001 - \$1,000,000

☒ Over \$1,000,000

____/____/11

ACQUIRED

____/____/11

DISPOSED

NATURE OF INTEREST

☒ Property Ownership/Deed of Trust

☐ Stock

☐ Partnership

☐ Leasehold

Yrs. remaining

☐ Other

☐ Check box if additional schedules reporting investments or real property are attached

► 1. BUSINESS ENTITY OR TRUST

BOTELHO FARMS

Name

382 OLYMPIA AVE., SAN JUAN BTA., CA. 95045

Address (Business Address Acceptable)

Check one

☐ Trust, go to 2 ☒ Business Entity, complete the box, then go to 2

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

FAIR MARKET VALUE

IF APPLICABLE, LIST DATE:

☐ \$0 - \$1,999

☐ \$2,000 - \$10,000

☐ \$10,001 - \$100,000

☐ \$100,001 - \$1,000,000

☒ Over \$1,000,000

____/____/11

ACQUIRED

____/____/11

DISPOSED

NATURE OF INVESTMENT

☒ Sole Proprietorship

☐ Partnership

Other

YOUR BUSINESS POSITION **OWNER**

► 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)

☐ \$0 - \$499

☐ \$10,001 - \$100,000

☐ \$500 - \$1,000

☒ OVER \$100,000

☐ \$1,001 - \$10,000

► 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary.)

► 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD BY THE BUSINESS ENTITY OR TRUST

Check one box:

☐ INVESTMENT

☒ REAL PROPERTY

Name of Business Entity, if Investment, or
Assessor's Parcel Number or Street Address of Real Property

382 OLYMPIA AVE., SAN JUAN BTA., CA. 95045

Description of Business Activity or
City or Other Precise Location of Real Property

FAIR MARKET VALUE

IF APPLICABLE, LIST DATE:

☐ \$2,000 - \$10,000

☐ \$10,001 - \$100,000

☐ \$100,001 - \$1,000,000

☒ Over \$1,000,000

____/____/11

ACQUIRED

____/____/11

DISPOSED

NATURE OF INTEREST

☒ Property Ownership/Deed of Trust

☐ Stock

☐ Partnership

☐ Leasehold

Yrs. remaining

☐ Other

☐ Check box if additional schedules reporting investments or real property are attached

Comments: _____

SCHEDULE B
Interests in Real Property
(Including Rental Income)

| |
|-------------------------------------------------------------------|
| CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION |
| Name ANTHONY BOTELHO |

► ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS

10 FLINT ROAD

CITY

HOLLISTER

FAIR MARKET VALUE

- ☐ \$2,000 - \$10,000
☐ \$10,001 - \$100,000
☒ \$100,001 - \$1,000,000
☐ Over \$1,000,000

IF APPLICABLE, LIST DATE:

____/____/11 ____/____/11
ACQUIRED DISPOSED

NATURE OF INTEREST

- ☒ Ownership/Deed of Trust ☐ Easement

☐ Leasehold ☐ _____
Yrs. remaining Other

IF RENTAL PROPERTY, GROSS INCOME RECEIVED

- ☐ \$0 - \$499 ☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000
☒ \$10,001 - \$100,000 ☐ OVER \$100,000

SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.

Holmes & Sons, Nico Solis, Schroeder Industrial Liquidations

► ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS

2171 OLD SAN JUAN HIGHWAY

CITY

SAN JUAN BAUTISTA

FAIR MARKET VALUE

- ☐ \$2,000 - \$10,000
☐ \$10,001 - \$100,000
☐ \$100,001 - \$1,000,000
☒ Over \$1,000,000

IF APPLICABLE, LIST DATE:

____/____/11 ____/____/11
ACQUIRED DISPOSED

NATURE OF INTEREST

- ☐ Ownership/Deed of Trust ☐ Easement

☒ Leasehold 3 yrs. ☐ _____
Yrs. remaining Other

IF RENTAL PROPERTY, GROSS INCOME RECEIVED

- ☐ \$0 - \$499 ☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000
☒ \$10,001 - \$100,000 ☐ OVER \$100,000

SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.

Natural Selections (Earthbound Farms)

* You are not required to report loans from commercial lending institutions made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows:

NAME OF LENDER*

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF LENDER

INTEREST RATE

TERM (Months/Years)

_____% ☐ None

HIGHEST BALANCE DURING REPORTING PERIOD

- ☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000
☐ \$10,001 - \$100,000 ☐ OVER \$100,000

☐ Guarantor, if applicable

NAME OF LENDER*

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF LENDER

INTEREST RATE

TERM (Months/Years)

_____% ☐ None

HIGHEST BALANCE DURING REPORTING PERIOD

- ☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000
☐ \$10,001 - \$100,000 ☐ OVER \$100,000

☐ Guarantor, if applicable

Comments:

SCHEDULE B
Interests in Real Property
(Including Rental Income)

Name

ANTHONY BOTELHO

► ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS

7480 SAN FELIPE ROAD

CITY

GILROY

FAIR MARKET VALUE

- ☐ \$2,000 - \$10,000
☐ \$10,001 - \$100,000
☐ \$100,001 - \$1,000,000
☒ Over \$1,000,000

IF APPLICABLE, LIST DATE:

____/____/11 ____/____/11
ACQUIRED DISPOSED

NATURE OF INTEREST

☒ Ownership/Deed of Trust ☐ Easement

☐ Leasehold _____
Yrs. remaining ☐ _____
Other

IF RENTAL PROPERTY, GROSS INCOME RECEIVED

- ☐ \$0 - \$499 ☐ \$500 - \$1,000 ☒ \$1,001 - \$10,000
☐ \$10,001 - \$100,000 ☐ OVER \$100,000

SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.

► ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS

382 OLYMPIA AVENUE

CITY

SAN JUAN BAUTISTA

FAIR MARKET VALUE

- ☐ \$2,000 - \$10,000
☐ \$10,001 - \$100,000
☐ \$100,001 - \$1,000,000
☒ Over \$1,000,000

IF APPLICABLE, LIST DATE:

____/____/11 ____/____/11
ACQUIRED DISPOSED

NATURE OF INTEREST

☒ Ownership/Deed of Trust ☐ Easement

☐ Leasehold _____
Yrs. remaining ☐ _____
Other

IF RENTAL PROPERTY, GROSS INCOME RECEIVED

- ☐ \$0 - \$499 ☐ \$500 - \$1,000 ☒ \$1,001 - \$10,000
☐ \$10,001 - \$100,000 ☐ OVER \$100,000

SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.

* You are not required to report loans from commercial lending institutions made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows:

NAME OF LENDER*

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF LENDER

INTEREST RATE

TERM (Months/Years)

_____% ☐ None

HIGHEST BALANCE DURING REPORTING PERIOD

- ☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000
☐ \$10,001 - \$100,000 ☐ OVER \$100,000
☐ Guarantor, if applicable

NAME OF LENDER*

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF LENDER

INTEREST RATE

TERM (Months/Years)

_____% ☐ None

HIGHEST BALANCE DURING REPORTING PERIOD

- ☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000
☐ \$10,001 - \$100,000 ☐ OVER \$100,000
☐ Guarantor, if applicable

Comments:

CALIFORNIA FORM 700

FAIR POLITICAL PRACTICES COMMISSION

Name
ANTHONY BOTELHO

▶ **2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PERIOD**

| | | |
|-----------------------------------------------|---------------------------------------------------------------------------|---------------------|
| NAME OF LENDER* | INTEREST RATE | TERM (Months/Years) |
| _____ | _____ % <input type="checkbox"/> None | _____ |
| ADDRESS (Business Address Acceptable) | | |
| _____ | | |
| BUSINESS ACTIVITY, IF ANY, OF LENDER | SECURITY FOR LOAN | |
| _____ | <input type="checkbox"/> None <input type="checkbox"/> Personal residence | |
| _____ | <input type="checkbox"/> Real Property _____ | |
| | | Street address |
| HIGHEST BALANCE DURING REPORTING PERIOD | | |
| <input type="checkbox"/> \$500 - \$1,000 | | |
| <input type="checkbox"/> \$1,001 - \$10,000 | | |
| <input type="checkbox"/> \$10,001 - \$100,000 | <input type="checkbox"/> Guarantor _____ | |
| <input type="checkbox"/> OVER \$100,000 | <input type="checkbox"/> Other _____ | |
| | | (Describe) |

FPPC Form 700 (2011/2012) Sch. C
FPPC Toll-Free Helpline: 866/275-3772 www.fppc.ca.gov

SCHEDULE C
Income, Loans, & Business
Positions
(Other than Gifts and Travel Payments)

| |
|-------------------------------------------------------------------|
| CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION |
| Name ANTHONY BOTELHO |

► **1. INCOME RECEIVED**

NAME OF SOURCE OF INCOME

B & P FRUIT COMPANY

ADDRESS (Business Address Acceptable)

382 OLYMPIA AVENUE, SAN JUAN BAUTISTA, CA.

BUSINESS ACTIVITY, IF ANY, OF SOURCE

FARMING

YOUR BUSINESS POSITION

TREASURER

GROSS INCOME RECEIVED

- ☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000
☒ \$10,001 - \$100,000 ☐ OVER \$100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED

☒ Salary ☐ Spouse's or registered domestic partner's income

☐ Loan repayment ☐ Partnership

☐ Sale of _____
(Real property, car, boat, etc.)

☐ Commission or ☐ Rental Income, list each source of \$10,000 or more

☐ Other _____
(Describe)

► **1. INCOME RECEIVED**

NAME OF SOURCE OF INCOME

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

YOUR BUSINESS POSITION

GROSS INCOME RECEIVED

- ☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000
☐ \$10,001 - \$100,000 ☐ OVER \$100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED

☐ Salary ☐ Spouse's or registered domestic partner's income

☐ Loan repayment ☐ Partnership

☐ Sale of _____
(Real property, car, boat, etc.)

☐ Commission or ☐ Rental Income, list each source of \$10,000 or more

☐ Other _____
(Describe)

► **2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PERIOD**

* You are not required to report loans from commercial lending institutions, or any indebtedness created as part of a retail installment or credit card transaction, made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows:

NAME OF LENDER*

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF LENDER

HIGHEST BALANCE DURING REPORTING PERIOD

- ☐ \$500 - \$1,000
☐ \$1,001 - \$10,000
☐ \$10,001 - \$100,000
☐ OVER \$100,000

INTEREST RATE

_____% ☐ None

TERM (Months/Years)

SECURITY FOR LOAN

☐ None ☐ Personal residence

☐ Real Property _____
Street address

City

☐ Guarantor _____

☐ Other _____
(Describe)

Comments: _____

SCHEDULE E
Income – Gifts
Travel Payments, Advances,
and Reimbursements

| |
|-------------------------------------------------------------------|
| CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION |
| Name ANTHONY BOTELHO |

- You must mark either the gift or income box.
- Mark the 501(c)(3) box for a travel payment received from a nonprofit 501(c)(3) organization. These payments are not subject to the \$420 gift limit, but may result in a disqualifying conflict of interest.

| | |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <p>► NAME OF SOURCE REGIONAL COUNCIL OF RURAL COUNTIES</p> <p>ADDRESS (Business Address Acceptable) 1215 K STREET</p> <p>CITY AND STATE SACRAMENTO, CA. 95814</p> <p>BUSINESS ACTIVITY, IF ANY, OF SOURCE <input type="checkbox"/> 501 (c)(3)</p> <p>DATE(S): <u>01 / 01 / 11</u> - <u>12 / 31 / 11</u> AMT: \$ <u>1,748.98</u> (If gift)</p> <p>TYPE OF PAYMENT: (must check one) <input type="checkbox"/> Gift <input type="checkbox"/> Income</p> <p><input type="checkbox"/> Made a Speech/Participated in a Panel <input checked="" type="checkbox"/> Other - Provide Description Travel and meal expenses related to volunteer services on the RCRC Board of Directors.</p> | <p>► NAME OF SOURCE</p> <p>ADDRESS (Business Address Acceptable)</p> <p>CITY AND STATE</p> <p>BUSINESS ACTIVITY, IF ANY, OF SOURCE <input type="checkbox"/> 501 (c)(3)</p> <p>DATE(S): ____ / ____ / ____ - ____ / ____ / ____ AMT: \$ ____ (If gift)</p> <p>TYPE OF PAYMENT: (must check one) <input type="checkbox"/> Gift <input type="checkbox"/> Income</p> <p><input type="checkbox"/> Made a Speech/Participated in a Panel <input type="checkbox"/> Other - Provide Description</p> |
| <p>► NAME OF SOURCE</p> <p>ADDRESS (Business Address Acceptable)</p> <p>CITY AND STATE</p> <p>BUSINESS ACTIVITY, IF ANY, OF SOURCE <input type="checkbox"/> 501 (c)(3)</p> <p>DATE(S): ____ / ____ / ____ - ____ / ____ / ____ AMT: \$ ____ (If gift)</p> <p>TYPE OF PAYMENT: (must check one) <input type="checkbox"/> Gift <input type="checkbox"/> Income</p> <p><input type="checkbox"/> Made a Speech/Participated in a Panel <input type="checkbox"/> Other - Provide Description</p> | <p>► NAME OF SOURCE</p> <p>ADDRESS (Business Address Acceptable)</p> <p>CITY AND STATE</p> <p>BUSINESS ACTIVITY, IF ANY, OF SOURCE <input type="checkbox"/> 501 (c)(3)</p> <p>DATE(S): ____ / ____ / ____ - ____ / ____ / ____ AMT: \$ ____ (If gift)</p> <p>TYPE OF PAYMENT: (must check one) <input type="checkbox"/> Gift <input type="checkbox"/> Income</p> <p><input type="checkbox"/> Made a Speech/Participated in a Panel <input type="checkbox"/> Other - Provide Description</p> |

Comments: _____